FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

OMB	APPROVAL				
OMB Number:	3235-0076				
Expires:	November 30, 2001				
Estimated average burden					
hours per respons	e16.00				

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY							
Prefix			Serial				
DATE RECEIVED							

Name of Offering (COW Fund, Ltd.	check if this is an amen	dment and name has	changed. and indi	cate change.)		
Filing Under (Check box(es) that apply):		□ Rule 504 □ Rule 505 🗵		⊠ Rule 506	☐ Section 4(6)	☐ ULOE
Type of Filing:	■ New Filing	☐ Amendment				
		A. BASIC II	DENTIFICATI	ON DATA		
1. Enter the information	on requested about the is	suer				
Name of Issuer (□ che QW Fund, Ltd.	eck if this is an amendme	ent and name has cha	anged, and indicate	change.)		
Address of Executive Cook M&C Corporate S Town, Grand Cayman	Services Limited, Post O	Number and Street, ffice Box 309 GT, U	•		ne Number (Including 9-8066	Area Code)
Address of Principal B (if different from Exec		(Number and Street,	City, State, Zip Co	ode) Telephor	ne Number (Including	Area OROCES
Brief Description of B Private Investment F					p.	THOMSON
	□ lim	Organization: 0 (Enter two-lette	to the formed see form	Cayman I ☑ Actual ce abbreviation for	(please specify): slands exempted com ☐ Estimated State:	pany 2003

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972*2/99)1 of 8

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Ø	General and/or Managing Partner
Full Name (Last name first, if indi Quellos Capital Management, L	,	nanager of Issuer)				
Business or Residence Address 601 Union Street, 56 th Floor, Sea	•	reet, City, State, Zip Code 98101	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director		General and/or Managing Partner
Full Name (Last name first, if indi Clarvit, Charles I.	vidual)					
Business or Residence Address 667 Madison Avenue, 25 th Floor		reet, City, State, Zip Code York 10021	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director		General and/or Managing Partner
Full Name (Last name first, if indi Greenstein, Jeffrey I.	vidual)					
Business or Residence Address 601 Union Street, 56 th Floor, Sea		reet, City, State, Zip Code 98101	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director		General and/or Managing Partner
Full Name (Last name first, if indi White, Bryan K.	vidual)					
Business or Residence Address 601 Union Street, 56 th Floor, Sea		reet, City, State, Zip Code 98101	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director		General and/or Managing Partner
Full Name (Last name first, if indi Bontje, Norman D.	ividual)					
Business or Residence Address 601 Union Street, 56 th Floor, Sea	(Number and Stattle, Washington	treet, City, State, Zip Code 98101	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if indi Bender, Marie M.	ividual)					
Business or Residence Address 601 Union Street, 56 th Floor, Sea		treet, City, State, Zip Cod 98101	e)			
	(Use blank shee	t, or copy and use addition	nal copies of this sheet, as	s necessary.)		

				B. IN	FORMAT	TON AB	OUT OFF	ERING			***************************************	
1. Has	the issuer so	ld, or does t	he issuer in				stors in this o				Yes □	No
2 Wha	t is the mini	mum invest	ment that w				_				\$ 50	* 000,000
									but not less	Issuer's sole than \$50,000		
3. Does	the offering	g permit joir	nt ownership	of a single	unit?						Yes 🗷	No
comi a per state	mission or s son to be li	imilar remu sted is an as ame of the	neration for ssociated pe broker or d	solicitation rson or ager ealer. If mo	of purchase nt of a broke ore than five	ers in conne er or dealer e (5) person	be paid or ection with s registered value to be lister only.	ales of secu vith the SEC	rities in the C and/or wit	offering. If th a state or		
Full Nar	ne (Last nan	ne first, if in	dividual)									
Not app	licable.											
Business	or Residen	ce Address	(Numbe	er and Street	t, City, State	, Zip Code))					
Name of	Associated	Broker or I	Dealer									
States in	Which Pers	on Listed H	las Solicited	or Intends	to Solicit Pu	ırchasers				<u></u>		
(Chec	k "All State	s" or check	individual S	tates)		•••••		•••••		••••	🗆 .	All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) (MI) (OH) (WV)	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
	ne (Last nar		idividual)		,							
Business	s or Residen	ce Address	(Numbe	er and Stree	t, City, State	e, Zip Code))					
Name of	Associated	Broker or I	Dealer							····		
States in	Which Per	son Listed F	Ias Solicited	or Intends	to Solicit Pu	ırchasers						
(Chec	k "All State	s" or check	individual S	states)		•••••						All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nar	ne (Last nar	ne first, if ir	ndividual)									
Busines	s or Residen	ce Address	(Numbe	er and Stree	t, City, State	e, Zip Code))		<u> </u>			
Name of	f Associated	Broker or I	Dealer		-3,							
States in	Which Per	son Listed F	las Solicited	or Intends	to Solicit Pu	ırchasers						
(Chec	k "All State	s" or check	individual S	States)			***************************************	***************************************	•••••			All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering check this				
	box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		aggregate ering Price	Amo	ount Already Sold
	Debt		0	\$	0
	Equity		0	\$	0
	□ Common □ Preferred			-	
	Convertible Securities (including warrants)	\$	0	\$	0
	Partnership Interests		0	\$	0
	Other (Specify) Participating Non-Voting Shares	\$	unlimited	\$	100,000,000
	Total	\$	unlimited	\$	100,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors	Dol	aggregate lar Amount Purchases
	Accredited Investors		2	\$	100,000,000
	Non-accredited Investors	-	0	-	0
	Total (for filings under Rule 504 only)		N/A		N/A
	Answer also in Appendix, Column 4, if filing under ULOE.			· 	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		_		
	Type of Offering		Type of Security	Dol	lar Amount Sold
	Rule 505		N/A	\$	0
	Regulation A		N/A	\$ \$	0
	Rule 504		N/A	\$	0
	Total		N/A	\$ \$	0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees		\square	\$	125,000
	Accounting Fees		\square	\$	25,000
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify) Custodian/Administration Fees			\$	65,000
	Total		\square	\$	215,000
: 					

		sponse to Part C - question 4.a. This he issuer."			\$	99,785,000		
5.	Indicate below the amount of the adjusted gross proced for each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of gross proceeds to the issuer set forth in response to Par	purpose is not known, furnish an estimate and f the payments listed must equal the adjusted						
			Office	lyments to ers, Directors Affiliates	Pa	nyments To Others		
	Salaries and Fees				П.\$	0		
	Purchase of real estate		_		_	0		
	Purchase, rental or leasing and installation of machin					0		
	Construction or leasing of plant buildings and facilities					0		
	Acquisition of other businesses (including the value of			0	_	0		
	be used in exchange for the assets or securities of and	other issuer pursuant to a merger)		<u></u>	- *-			
	Repayment of indebtedness		□ \$_	0	□ \$_	0		
	Working capital		□ \$_	0	□ \$_	0		
	Other (specify) <u>Investment in securities</u>				☑ \$_	99,785,000		
	Column Totals		፟ \$_	*	☑ \$_	99,785,000		
	Total Payments Listed (column totals added)			☑ \$	99,785,0	<u>00</u>		
	* SEE ATTACHMENT							
-	· I	D. FEDERAL SIGNATURE			 -			
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furnisormation furnished by the issuer to any non-accredited	h to the U.S. Securities and Exchange Commiss	ion, upo					
ī	ssuer (Print or Type)	Signature		Date				
(W Fund, Ltd.	Shelly Vinet		Oct	ober 14,	2003		
ì	Jame of Signer (Print or Type)	Title of Signer (Print or Type)						
1	sy: Quellos Capital Management, L.P.	Investment Manager of Issuer						
1	Jame of Signer (Print or Type)	Title of Signer (Print or Type)						
5	herrey L. Luetjen	Associate General Counsel of Investment Ma	anager					
	ATTENTION							
	Intentional misstatements or omissions	of fact constitute federal criminal viola	tions.	(See 18 U	S.C. 10	001.)		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Attachment to Form D QW Fund, Ltd.

Footnote to Part C - Question 5

Salaries and Fees

Issuer will pay its investment manager a quarterly advisory fee which will vary depending upon the performance of the relevant series of shares and Issuer's performance relative to a predetermined "Quarterly Base Return." If Issuer's actual return is equal to or less than the Quarterly Base Return, the advisory fee for the applicable quarter is equal to 0.125% of the net asset value of Issuer for such shares. If Issuer's actual return is greater than the Quarterly Base Return, the advisory fee for the applicable quarter will be increased by 12.5% of the excess, but in no event greater than 0.625%.